

SECTION 5 INPATIENT REHABILITATION SCHEDULE

A hospital must meet one of the following criteria, as determined by MO HealthNet, before it is given a file indicator allowing it to bill special rehabilitation diagnosis codes:

- Medicare certification of ten or more beds as a rehabilitation hospital or a rehabilitation distinct part which is exempt from the Medicare prospective rate-setting system; or
- Certification of ten or more beds by the Commission for Accreditation of Rehabilitation Facilities.

These stays must be certified by Health Care Excel (HCE) using one of the diagnosis codes below:

DESCRIPTION	MHD Established Length of Stay	ICD-9-CM DIAGNOSIS CODE(S)
Spinal cord injury, quadriplegia	30 days	950 - 957
Spinal cord injury, cervical fracture	25 days	806
Spinal cord injury, paraplegia	30 days	344
Spinal cord injury, hemiplegia	25 days	342
Cerebral vascular accident	29 days	434.91
Head trauma	35 days	803, 854
Muscular dystrophy	20 days	359
Orthopedic trauma, arm	29 days	885 - 887
Orthopedic trauma, leg	29 days	895 - 897
Late effect of injury to the nervous system	30 days	905 - 909
Degenerative joint disease	20 days	714 - 716

Refer to the ICD-9 for any appropriate 4th and/or 5th digits that may be required for a diagnosis code.